

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>		48	12/11/01
<b>O.I.P.E. CLASSIFIER</b>	35	573	12-18-01
<b>FORMALITY REVIEW</b>			
<b>RESPONSE FORMALITY REVIEW</b>	A.T	1071	03/18/02

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1 ✓ 5-16-99	
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Claim	Date
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573-02  
03-01  
94-2  
12/14/01

If more than 150 claims or 10 actions  
staple additional sheet here

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